SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE		9	OF		9
(c	(check only one)										
	X	11a		11b		11c		12			
		13		14		15		16			17

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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) I-VOTE Health of IASIS Healtl	ncare Corporation Political Action C	Committee				
Full Name (Last, First, Middle Initial) JASON WORTHEN Moiling Address 2007 C. Grishad Lass	Date of Receipt					
Mailing Address 8037 S. Cricket Lane	06 30 _ 2015 _					
City	State Zip Code	Transaction ID : PR792199814358				
West Jordan	UT 84081-1913	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	76.92				
Name of Employer	Occupation					
Health Choice Utah	CEO					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name (Last, First, Middle Initial) 3. MARK L. BERNARD	Date of Receipt					
Mailing Address 1401 St. Joseph Parkway	06 30 2015					
City	State Zip Code TX 77002-8301	Transaction ID : PR802673014358				
Houston		Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	150.00				
Name of Employer St. Joseph Medical Center	Occupation					
Receipt For:	CEO					
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	P/R Deduction (\$150.00 Monthly)				
Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial)					
Mailing Address		Date of Receipt				
City	State Zip Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С					
Name of Employer						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼					
SUBTOTAL of Receipts This Page (optional).		226.92				
TOTAL This Period (last page this line number	er only)	1030.26				